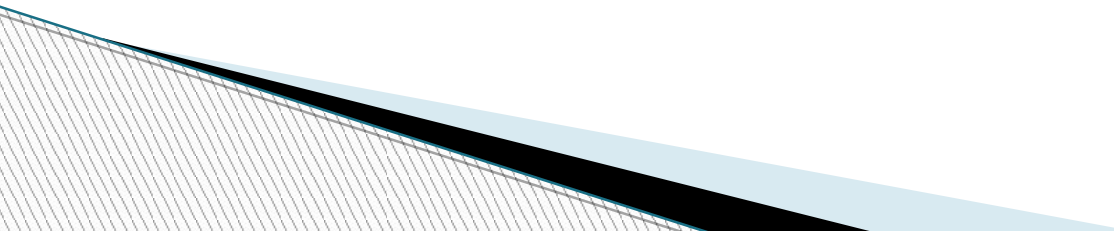


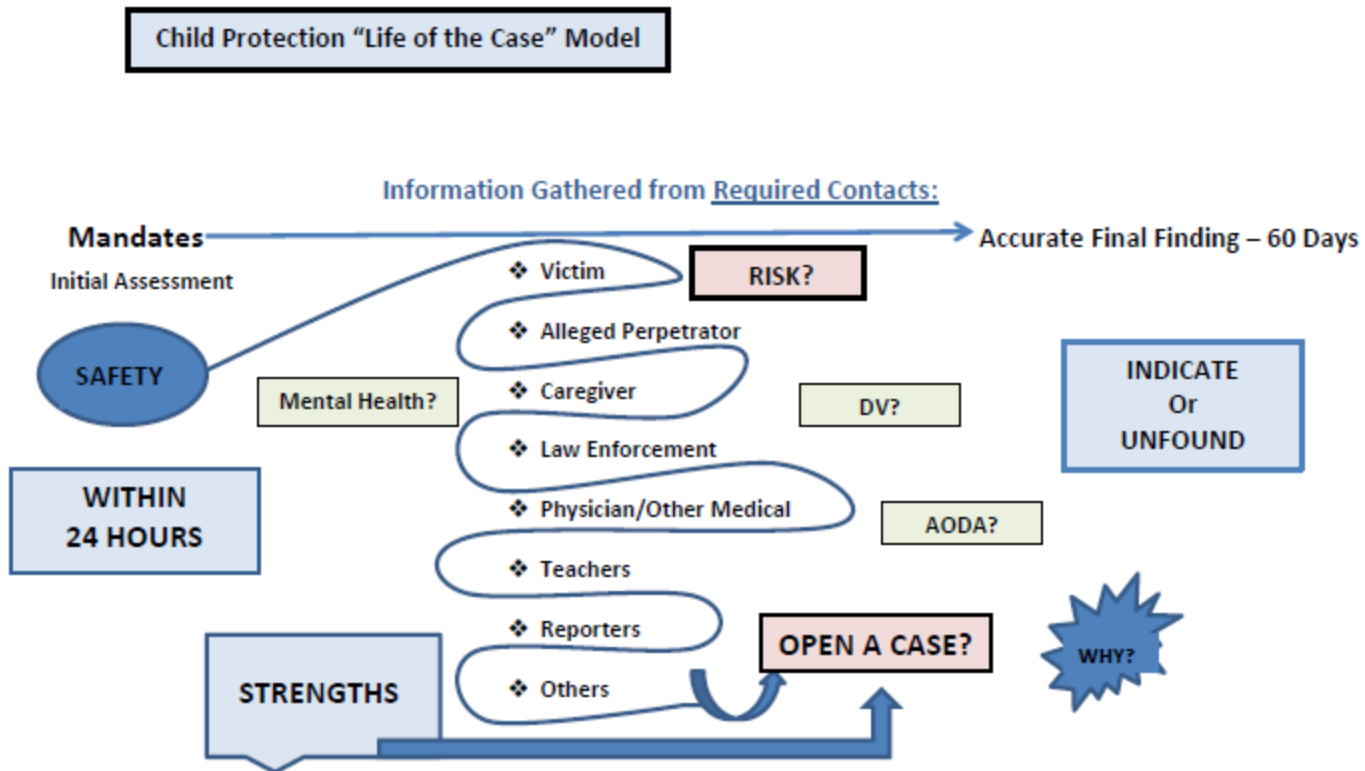
Child Protection Foundation Training

Life of the Case Assessment Underlying Conditions

Core Competencies

- ▶ Identify and assess the presence of other existing conditions that can impact Protective Capacities within the family
 - ▶ Assess immediate safety concerns and emerging risks and articulate the level of intervention needed
 - ▶ Recognize the need to screen for underlying conditions throughout the Life of the Case
- 

A Return to.....



Impact of Underlying Conditions

- ▶ What we know....
 - Young children are the most vulnerable to child maltreatment and they are also the most vulnerable to the effects of caregivers and home instability



Underlying Conditions

- ▶ Domestic Violence
- ▶ Mental Health
- ▶ Alcohol and other Drug Abuse (AODA)
- ▶ Developmental Disabilities

*** Presence of Sexual Abuse

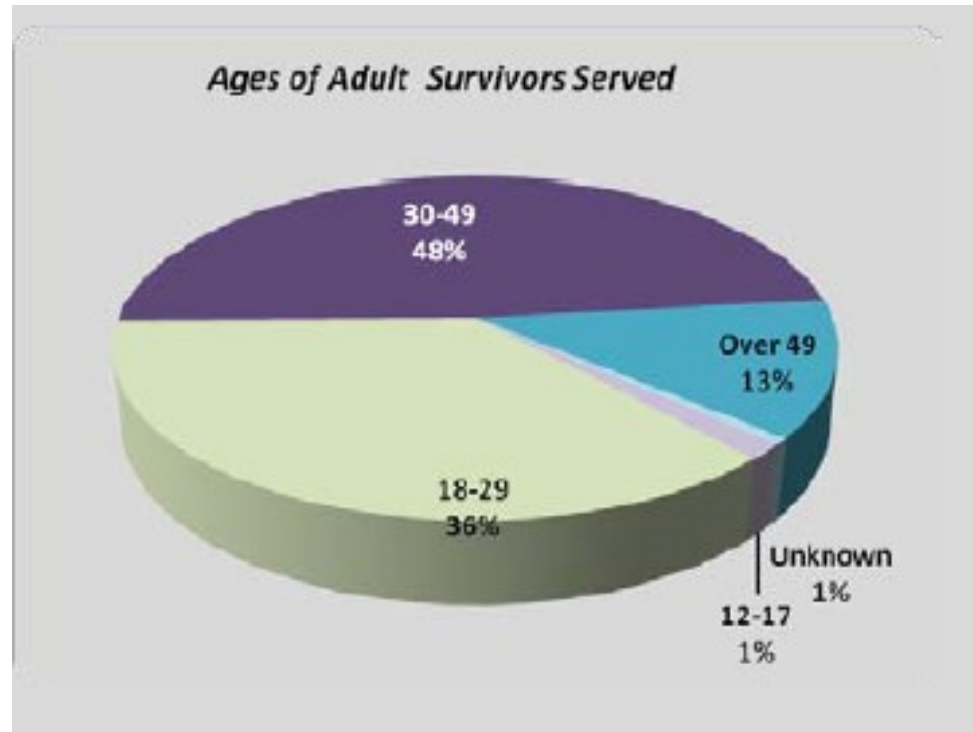


Underlying Conditions: Impact

- ▶ A parent's ability to:
 - Supervise
 - Protect
 - Provide for needs



In Illinois: 43,201 Adult Survivors of Domestic Violence & 8,234 Child Witnesses in 2014



Domestic Violence

- ▶ How does screening occur for DV?
 - Begins with the report taken at SCR
 - Initial contact with child & family
 - Interviews with collaterals (what do they know?)
 - Use of the CERAP and CANTS 18 DV
 - Information from LEADS

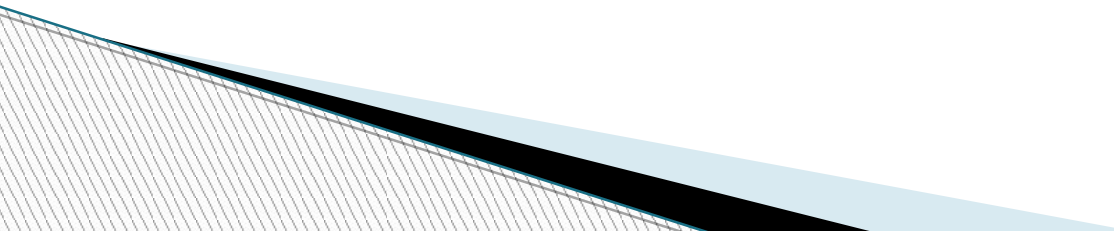


Domestic Violence Protocol

- ▶ Screening: ***Must be completed for all Family Reports***
 - Within first seven days
 - Prior to the case handoff staffing
 - Whenever domestic violence is suspected or identified and;
 - At the close of the investigation



Domestic Violence Protocol

- ▶ In the absence of police reports, prior CANTs history or verbal/anecdotal information, can we identify any other indicators that might alert us to the presence or risk of domestic violence??
- 

Domestic Violence Protocol

Key Considerations

- ▶ Is this a safe time for you to conduct the DV screen?
- ▶ Can you identify a time and place to interview a DV victim outside of the presence of an alleged batterer or other members of the household?

Remember: DV screens should be done one to one, outside of the presence of any children or other members of the home



CANTS 18

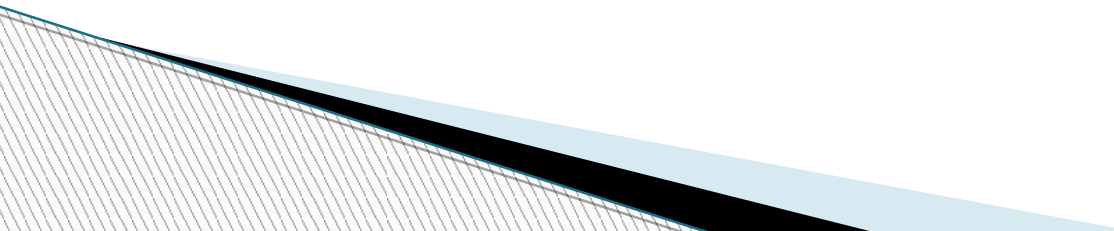
Activity



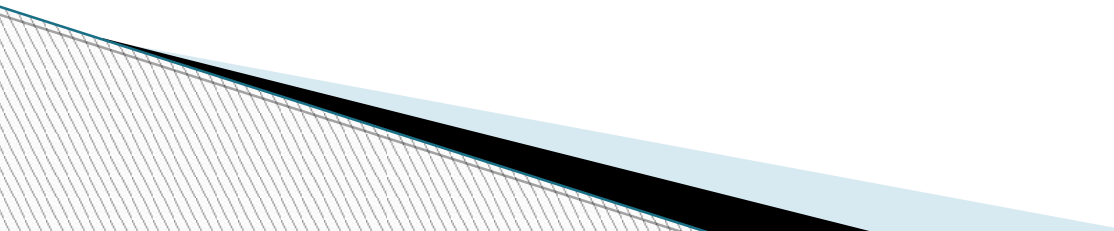
Mental Health

- ▶ How does screening begin for Mental Health concerns?
 - Begins with the report taken at SCR
 - Initial contact with child & family
 - Interviews with collaterals (what might they know?)
 - Use of the CERAP and CFS 440-5

Mental Health Data

- ▶ “Nationwide there is little coordination between the adult mental health systems and the child welfare systems” (Child Welfare Watch, 2009)
 - ▶ SAMHSA’s 2007 Survey: found that 10.9% of adults 18 or older (24.3 million) experienced serious psychological distress in the past year
 - ▶ Less than half (44.6%) received mental health services during that time
- 

Mental Health Screening

- ▶ **Remember:** Just because an underlying condition is identified we do not assume that there is a safety or risk concern
 - ▶ We need to stay focused on what if any impact this might have on the parent(s)/caretaker's ability to care for the child
- 

Key Consideration

- ▶ There continues to be stigma around mental illness and seeking mental health care. This is evidenced by the number of adults who report mental illness yet do not access services, as well as the number of child removals that occur when parents face allegations related to their mental illness. (“Mental Health Services to Families in their Homes to Protect Children and Prevent Removal” National Resource Center for Family-Centered Practice and Permanency Planning)

Alcohol and Other Drugs AODA



Drug & Alcohol (AODA)

- ▶ Alcohol and other drug addictions are chronic illnesses that affect over 1 million Illinoisans (<https://www.dhs.state.il.us/page.aspx?item=32300>)
- ▶ It is estimated that approximately 50 to 80% of all child abuse and neglect cases substantiated by child protective services involve some degree of substance abuse by the child's parents
(<http://archives.drugabuse.gov/about/welcome/aboutdrugabuse/magnitude/>)

AODA Screening

- ▶ How does screening begin for AODA?
 - Begins with the report taken at SCR
 - Initial contact with child & family
 - Interviews with collaterals (what might they know?)
 - LEADs results
 - Use of the CERAP and CFS 440-5

Key Consideration

- ▶ Like all of the screening tools, the information in AODA is self-reported therefore the use of other sources (collaterals, LEADs, CANTs) is crucial to accurately assessing the presence of underlying conditions

CANTS 440-5

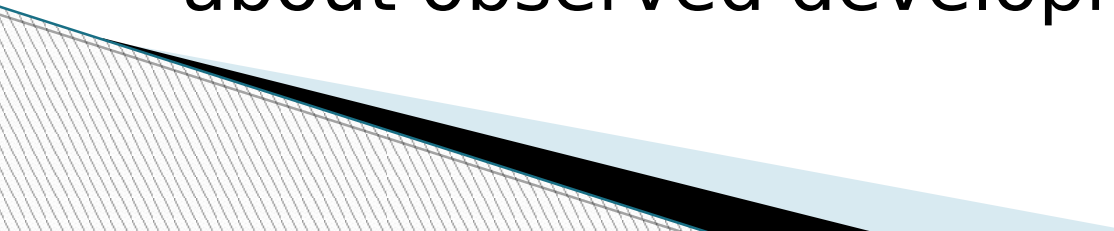
Substance Abuse Screen



Developmental Disabilities



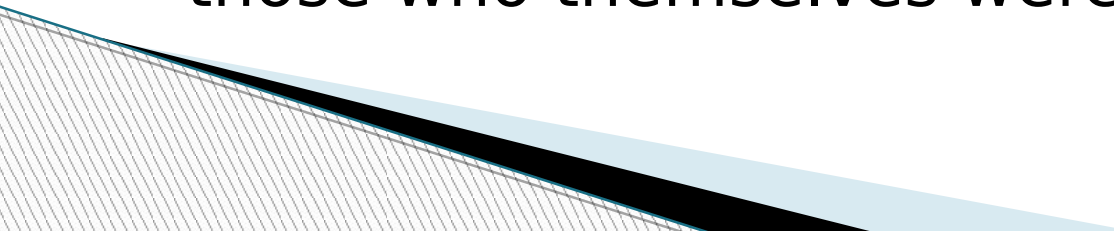
Developmental Disabilities

- ▶ There is no formal screening tool however, while using other screening tools, it is important for investigators to stay alert for signs and indicators of developmental disabilities (i.e. unrealistic expectations of a child's developmental stage)
 - ▶ The CFS 440-5 Section II inquires about disability benefits
 - ▶ The CERAP also has a direct question about observed developmental disabilities
- 


Child Sexual Abuse



The Presence of Sexual Abuse

- ▶ Statistically, more children are sexually abused in their own homes or by someone they know than by strangers
 - ▶ It is important to consider that the underlying conditions that we have addressed may create an environment that places children at greater risk of sexual abuse
 - ▶ Allegations of sexual abuse, though not an underlying condition, can also trigger strong emotional reactions for caregivers, particularly those who themselves were abused as children.
- 

Screening for Sexual Abuse

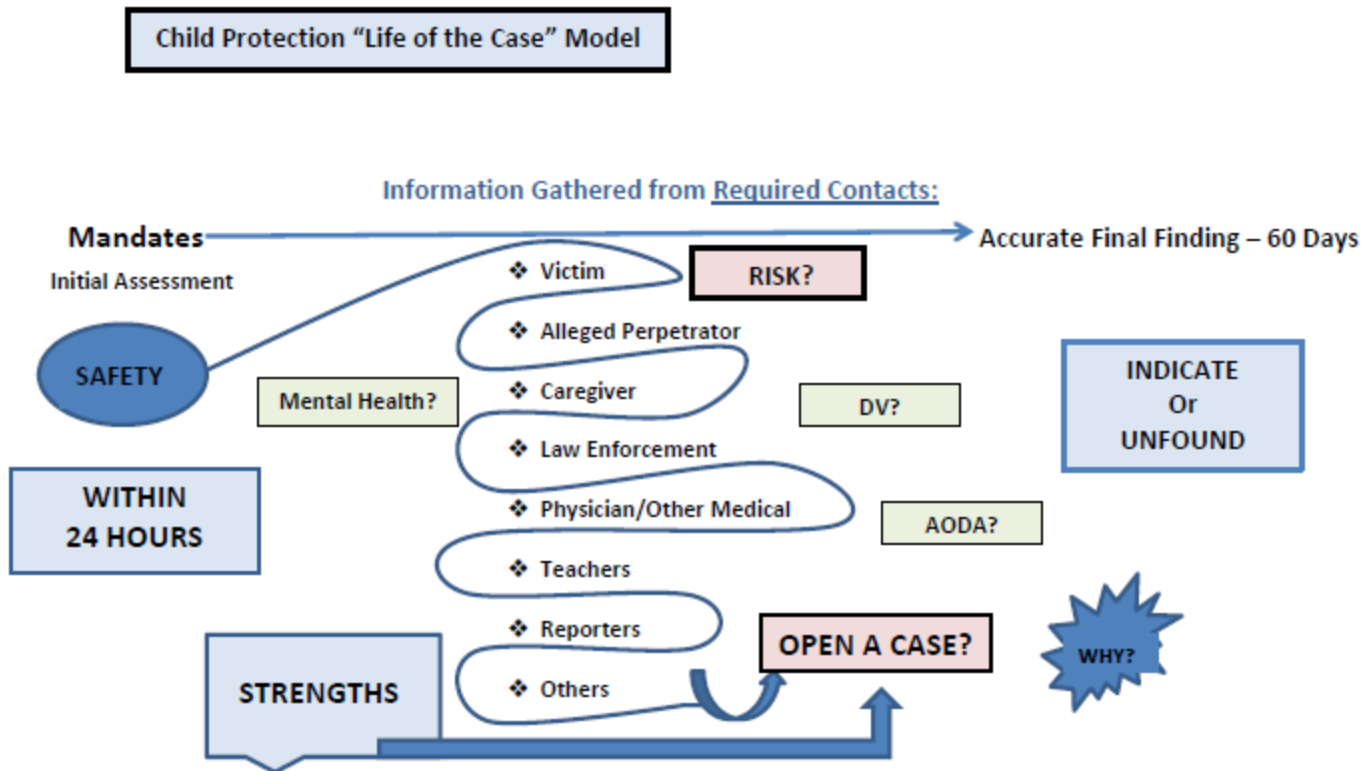
- ▶ Though there is no separate screening tool specifically for sexual abuse, there are a number of ways investigators look for information related to signs and history of sexual abuse:
 - CANTs check
 - LEADs results
 - CERAP (#4 – child sexual abuse is suspected and circumstances suggest that child safety may be an immediate concern)
 - Interviews with subjects and collaterals
- 

Reminder

- ▶ The purpose of screening for underlying conditions is to determine the need for further assessment and service intervention
- ▶ Screening for underlying conditions may directly link to additional safety issues for children, identify the need for services, and help us to eliminate unnecessary interventions (strength-based)



A Return to.....



Summary

- ▶ Life of the Case – the importance of ongoing observation and assessment and documenting any information that impacts a child's safety.
- ▶ Underlying conditions may not be part of the allegations but they do affect caretakers' capacity and their ability to protect.

